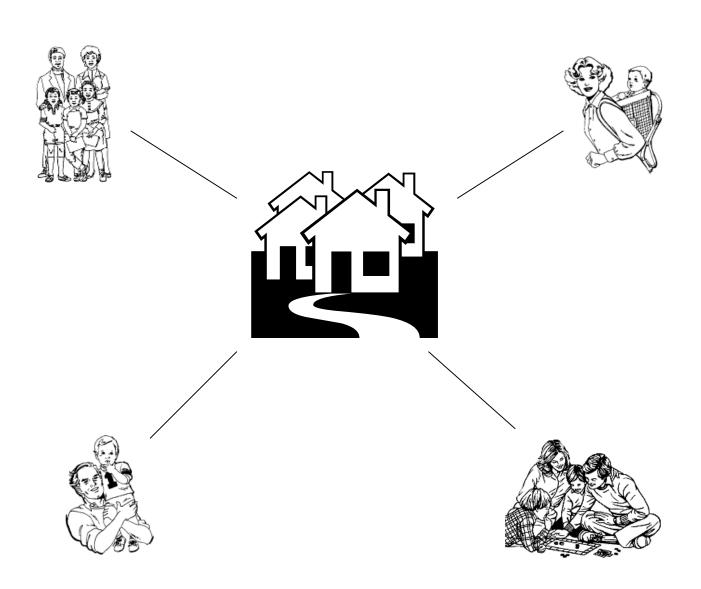
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION

# FOSTER FAMILY HOME REGULATION GUIDE



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This Foster Family Home guide is designed to assist foster parents to comply with regulations and perform periodic self-inspections of their home. The guide contains some of the most common deficiencies noted by Licensing Program Analysts during their evaluation visits. The guide does not include requirements for *Children with Special Health Care Needs*; for information regarding those requirements, refer to the Foster Family Home regulations. The guide is not a full summary of the Foster Family Home regulations. It cannot be used as a substitute for a good working knowledge of the regulations.

The guide summarizes the regulations and other conditions that often lead to citation. For that reason, foster parents should refer to the referenced regulation(s) for complete information on the requirements. The guide should be used frequently to review the home's compliance with regulations.

Limita	itions on Ca	pacity and Ambulatory Status	87010
MET	NOT MET		
		The foster home does not have more foster children that license allows.	n the
		The foster parent(s) have not accepted more than two in including their own without additional help.	fants,
		Non-ambulatory foster children are not placed in rooms only for ambulatory foster children.	approved
Disast	ter and Mass	s Casualty Plan	87023
MET	NOT MET		
		Foster parents maintain a current, written mass casualty followed in case of emergency that includes:	plan to be
		<ul> <li>Means of exiting</li> <li>Transportation arrangements</li> <li>Relocation sites</li> <li>Arrangements for supervision of children during evacurelocation</li> <li>Means of contacting local agencies</li> </ul>	uation or

MET	NOT MET	
		The foster home has a current edition of a first aid manual approved by the American Red Cross, American Medical Association or a state or federal health agency.
		Anytime a foster child is in the home, at least one of the persons providing direct care and supervision has received current first aid and CPR training appropriate to the child's age and needs.
		The foster home has a first aid kit which includes: sterile first aid dressing, bandages or roller bandages, adhesive tape, scissors, tweezers, thermometer, and antiseptic solution.
		The foster parent(s) maintain a record of each foster child's prescription medications which is retained for at least one year and includes the following:
		<ul> <li>Child's name</li> <li>Name of prescribing physician</li> <li>Drug name, strength and quantity</li> <li>Date filled</li> <li>Prescription number</li> <li>Pharmacy name</li> <li>Expiration date</li> <li>Number of refills and other instructions, if any, regarding control and custody of the medications</li> </ul>
		All centrally stored medications are locked. Each foster child's medication is stored in its original container.
		Medications are maintained in compliance with label instructions and medication labels are not altered.
		There are no expired medications (including over the counter medications) or medications for former foster children.
		There are no permanently discontinued medications in the facility.
		Medication is not set up more than 24 hours in advance.
		Each prescription medication and destroyed medication has been logged in a centrally stored medication record.

		Foster children are assisted with medications according to label/physician instructions. Foster parents do not administer injections to foster children unless authorized by law.
		Documentation is on file that the foster child's physician is aware of all over the counter medications the child is taking.
PRN N	Medications/	As Needed Medications
MET	NOT MET	
		Each foster child's file contains documentation from the foster child's physician that the foster child <u>can</u> determine and communicate his/her need for <u>prescription and non-prescription</u> PRN medication and the physician has provided written instructions for its use.
		OR
		For <u>non-prescription</u> PRN medication <u>only</u> , each foster child's file contains documentation from the foster child's physician that the foster child <u>cannot</u> determine his/her need but <u>can clearly</u> communicate his/her symptoms and the physician has provided written instructions for its use.
		OR
		For <u>prescription and non-prescription</u> PRN medication, when the foster child is <u>unable</u> to determine his/her own need for the medication and is <u>unable</u> to clearly communicate his/her symptoms the foster child's file contains a recommendation or prescription from the foster child's physician for the medication and written instructions for its use.
		OR
		For <u>prescription and non-prescription</u> PRN medication, when the foster child is <u>unable</u> to determine his/her own need for the medication and is <u>unable</u> to clearly communicate his/her symptoms foster parents must contact the foster child's physician before each dose is given and receive instructions.
Buildi	ngs And Gro	ounds 87087/ 87064
MET	NOT MET	
		The home is clean, safe, sanitary and in good repair at all times for the well being of the children.

The following requirements apply to all children residing in the foster home including the foster parent(s) children, guardianship children, and children in placement.

MET	NOT MET	
		No more than two children share a bedroom.
		Children of the opposite sex do not share a bedroom unless each child is under five years of age.
		No room commonly used for other purposes is used as a bedroom.
		Except for infants, children do not share a bedroom with an adult.
		No more than one infant and two adults share a bedroom.
Pool/V	Water Safety	7
MET	NOT MET	
		An adult who has the ability to swim provides supervision at all times when the children are using a pool or a body of water from which rescue requires the rescuer's ability to swim.
		The home has no swimming pool, wading pool, hot tub, spa, fish pond or other body of water that's accessible to children, unless:
		<ul> <li>Bodies of water on the property are either covered or surrounded by a fence at least five feet high</li> </ul>
		◆ The fence gate swings away from the body of water, and has a self-closing latch no more than six inches from the top of the gate
		<ul> <li>Pool covers are placed on the pool when the pool is not in use, are locked and are strong enough to completely support the weight of an adult</li> </ul>
		♦ If an above ground pool structure is used as the fence or the fence is mounted on top of the pool structure, the pool ladder is made inaccessible or a barricade is erected to prevent access to the pool when it is not in use
		<ul> <li>If the pool cannot be emptied after each use, the pool has a working pump and filtering system</li> </ul>

# Criminal Record/Child Abuse Central Index Clearances H&S Code 1522,1522.1

MET	NOT MET	
		A Department of Justice and Federal Bureau of Investigation Criminal Record Clearance and Child Abuse Central Index Clearance request has been submitted for all adults including volunteers, babysitters and respite workers who are left alone with or who provide care and supervision to foster children. These clearances must be submitted prior to the adult participating in the activities mentioned in this section.
Repor	ting Require	ements 87061
MET	NOT MET	
		Changes of persons living in the Foster Home are reported to licensing within 10 working days.
		Special incidents are reported to licensing within the next working day during normal business hours and a written report is submitted to licensing within seven days following the incident.
Incide	ents that mus	st be reported include but are not limited to the following:
		<ul> <li>Death of any child or any injury to a child which requires medical treatment</li> <li>Any unusual incident or child absence which threatens the physical or emotional health or safety of any child</li> <li>Any suspected physical or psychological abuse of any child</li> <li>Epidemic outbreaks</li> <li>Poisonings</li> <li>Catastrophes</li> <li>Fires or explosions which occur in or on the premises</li> </ul>
Foster	r Parent(s) D	Outies and Responsibilities 87064
MET	NOT MET	
		The foster parent(s) is/are regularly present in the home when children are present.
		When the foster parent(s) is/are absent from the home while children are present, the foster parent(s) arrange for supervision of the children by a responsible adult unless otherwise agreed to by licensing.

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### The foster parent(s) are also responsible for the following activities:

- Participating with the child in activities
- Participating with agencies and other responsible persons in planning for the needs of the child
- Making sure that the child is clean and providing the child with training in personal cleanliness and hygiene
- Protecting the child from home accidents
- Making arrangements for each foster child to attend available community treatment or training programs when the foster child has needs that can be met by such programs
- Participating in activities that increase the foster parent(s) own understanding of, and skill in, caring for foster children
- ♦ Assisting the child in the development of goals and encouraging him/her to reach those goals
- ♦ Supervising the delivery of basic services within the home
- Ensuring the supervision of children during participation in or presence at potentially dangerous activities

#### **Needs and Services Plans**

87068.2/87068.3

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	Each foster child has a needs and services plan that describes
	his/her service needs. The plan is updated at least annually or as
	frequently as needed to accurately describe the child's current
	needs. If a needs and services plan is not provided at the time of
	placement, the foster parent must contact the child's placement
	worker to request their participation in the development of the plan.
	and must keep a detailed record of those requests. Each needs
	and services plan must contain the following information:

- ♦ Child's name
- ♦ Age
- Physical limitations
- ♦ History of infectious or contagious diseases
- History of other medical, emotional, behavioral and physical problems
- ♦ Child's ability to handle his/her cash resources

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- ◆ Current service needs related to physical limitations, infectious or contagious disease and the child's ability to handle his/her cash
- Any needs appraisal or individual program plans completed by a placement agency or consultant
- A plan for providing services to meet the child's needs identified above

## MET NOT MET

Prior to, or within 30 calendar days following acceptance of a foster child, the foster parent(s) must obtain a written medical assessment of the child performed by, or under the supervision of a licensed physician. The assessment cannot be over one year old when obtained. The assessment must provide the following:

- ◆ A record of any infections or contagious diseases which would exclude the care of the child in the home
- ♦ A test for tuberculosis
- A record of immunizations and childhood diseases
- Identification of the child's special problems and needs
- Identification of any prescribed medications being taken by the child
- ♦ The child's ambulatory status

Children's Records 87070

# MET NOT MET

The foster parent(s) maintain a separate, complete and current record at the home for each foster child. Each child's record includes but is not limited to the following:

- Name of the child
- ♦ Birth date and copy of the child's birth certificate if available
- ♦ Date of placement in the home
- ♦ Name, address and telephone number of the placement agency
- Name, address and telephone number of the person to be contacted in an emergency when the child's authorized representative cannot be contacted
- Written consent to obtain ordinary medical and dental care in an emergency when the child's authorized representative cannot be reached
- ♦ Name, address and telephone number of the child's physician, dentist and other medical and mental health providers, if any
- The foster child's medical assessment including ambulatory status
- ♦ A record of current medications, prescribing physician and instructions, if any, regarding control and custody of medications
- Name of all persons authorized to take the child from the home
- Medical and dental history, if available, including immunization records and physician's orders for any medically necessary diet

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- Religious preference and the name and address of clergyman or religious advisor, if any
- ♦ A copy of the child's needs and services plan and modifications
- A record of the continuing health needs and services received while the child is in the home, including but not limited to physical therapy and counseling
- ♦ Admission agreement
- An account of the child's case resources, personal property, and valuables entrusted to the foster parent(s)

Personal Rights	87072

# MET NOT MET

	Each foster child has personal rights including but not limited to the
	following:

- ♦ Is accorded dignity in his/her personal relationships with other persons in the home
- ♦ Is accorded safe, healthy and comfortable accommodations, furnishings and equipment that are appropriate to his/her needs
- ♦ Is free from corporal or unusual punishment, infliction of pain, humiliation, intimidation, ridicule, coercion, threat, mental abuse, or other actions of a punitive nature including but not limited to interference with daily living functions of eating, sleeping, or toileting, or withholding shelter, clothing, or aids to physical functioning
- ◆ To be informed, and to have his/her authorized representative informed, by the foster parent(s) of the law regarding complaints, including but not limited to the address and telephone number of the complaint receiving unit of the licensing agency and of information regarding the confidential registration of complaints
- To be free to attend religious services or activities of his/her choice and to have visits from the spiritual advisor of his/her choice
- Not to be locked in any room, building or facility premises by day or night
- ♦ Not to be placed in any restraint device unless it is a postural support approved by licensing in advance
- ◆ To be free of the administration of medication or chemical substances not authorized by a physician
- ◆ To be informed of the foster home's policy concerning family visits and other communication with the child

- ◆ To have visitors, including relatives, the child's authorized representative and others so long as the visits do not infringe on the rights of other children in the home and the visits occur during waking hours
- ♦ To wear his/her own clothes
- ◆ To possess and control his/her own cash resources, unless otherwise agreed to in the child's needs and services plan and by the child's authorized representative
- ◆ To possess and use his/her own personal possessions, including toilet articles
- ◆ To have an individual storage space for his/her private use
- ◆ To have access to a telephone to make and receive confidential calls so long as calls are not prohibited by court order or by the child's authorized representative, or are not prohibited as a form of discipline
- ◆ To have access to letter writing material and to send and receive unopened correspondence unless prohibited by court order or by the child's authorized representative, placement agency or parents
- To have the child's personal rights shared with the child and his/her authorized representative and a written copy of the child's personal rights be given to both

Telephones		87073	}
MET	NOT MET		
		The Foster Home has telephone service.	
Trans	portation	87074	ŀ
<u>MET</u>	NOT MET		
		Only drivers licensed for the type of vehicle operated are allowe transport children.	d to
		The vehicle's rated seating capacity is never exceeded and it is maintained in safe operating condition.	
		Infants are secured in a car seat designed for infants.	
		Children between two and four years of age and all children who weigh less than 40 pounds, or have disabilities which prevent the from sitting unassisted, are always secured in a car seat or hard designed for such children.	em

		Children over four years of age and who weigh ove are able to sit unassisted are always secured in the regular car seat belt/harness.	
Outdo	oor Activity S	Space	87087.2
MET	NOT MET		
		All natural or man-made hazards such as canals, condemned buildings, ditches, lakes, ocean fronts, lines, quarries, rivers, swamps, watercourses, and flooding which lie on or adjacent to the home's outcompace are made inaccessible.	mines, power areas subject to
Stora	ge Space		87087.4
MET	NOT MET		
		Medicines, disinfectants, cleaning solutions, poison other dangerous items are inaccessible to children.	
		<ul> <li>Storage areas for poisons, and firearms and oth weapons are locked</li> </ul>	er dangerous
		<ul> <li>Firing pins and ammunition are stored and locked from firearms</li> </ul>	ed separately
Fixtur	es, Furniture	e, Equipment, and Supplies	87088
MET	NOT MET		
		Fireplaces and open-faced heaters are made children.	e inaccessible to
		Infants are provided with a safe, sturdy bass	inet or crib.
		Bunk beds of more than two tiers are not use	ed.
		Bunk beds have railings on the upper tier to	prevent falling.
		Children under five years old or those who a climb into or out of the upper tier unassisted to use the upper tier.	